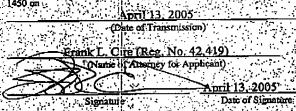
	FITZPATRICK, CELLA, HARPER & S	INTO
	650 Town Center Drive, Suite 1800 Costa Mesa, California 92626 (714) 540-8700	RECEIV CENTRAL FAX
	Facsimile:(714) 540-9823	APRIE
	FACSIMILE COVER SHEET	
TO:	U.S. Patent & Trademark Office Central Facsimile	
FROM:	Frank L. Gire (Reg. No.: 42,419)	
RE'	U.S. Application No. 09/836,163 Attn: Examiner W. Lin Group Arl Unit 2154 Atty. Docket No. 00169.002020	
FAX NO.:	(703) 872-9306	
DATE:	April 13, 2005 NO. OF PAGES:	8
TIME:	GISOM. SENT BY:	Dina
	MESSAGE	

Transmitted herewith is an Amendment and an Amendment Transmittal in response to the Office
Action dated January 13, 2005.

I hereby certify that this correspondence is being facsimile transmitted to: Communicationer for Paterts, P.O. Box 1450, Alexandria, VA. 22313-



## IF YOU DO NOT RECEIVE ALL THE PAGES PLEASE CALL 714-540-8700 AS SOON AS POSSIBLE

Note: We are transmitting from a Canon Model FAX-L770 (compatible with any Group I, Group II or Group III machine)

THIS FACSIMILE MESSAGE AND ACCOMPANYING DOCUMENTS ARE INTENDED ONLY FOR THE USE OF THE ADDRESSEE INDICATED ABOVE INFORMATION THAT IS PRIVILEGED OR OTHERWISE CONFIDENTIAL MAY BE CONTAINED THEREIN. IF YOU ARE NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, REVIEW OR USE OF THIS MESSAGE, DOCUMENTS OR INFORMATION CONTAINED THEREIN IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS MESSAGE IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE OR FACSIMILE AND MAIL THE ORIGINAL TO US AT THE ABOVE ADDRESS. THANK YOU.

00169.002020.

## PATENT APPLICATION

RECEIVED IN THE UNITED STATES PATENT AND TRADEMARK OFFICE CENTRAL FAX CENTER

APR 1 3 2005

In re Application of: Examiner: W. Lin WILLIAM SIMPSON-YOUNG, et al. Group Art Unit: 2154 Application No.: 09/836,163 Filed: April 18, 2001 For: TRANSPARENT **TELECOMMUNICATIONS** SYSTEM AND APPARATUS April 13, 2005

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## AMENDMENT

Sir:

In response to the Office Action dated January 13, 2005, please amend the above-identified application as follows:

> I hereby certify that this correspondence is being facsimile transmitted to: Commissioner for Patents. P.O. Box 1450, Alexandria, VA 22313-1450 oa

April 13, 2005 (Date of Transmission)

Frank L. Cire (Reg. No. 42,419) (Name of Assorney for Applicant)

> April 13, 2005 Signature

Date of Signature

In re Application of:

Docket No. 00169.002020.

WILLIAM SIMPSON-YOUNG, ct al.

Examiner: W. Lin

Application No.: 09/836,163

Group Art Unit: 2154

Filed: April 18, 2001

Date: April 13, 2005

For: TRANSPARENT TELECOMMUNICATIONS SYSTEM AND APPARATUS

Mail Stop Amendment COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

		C.	LAIMS AS AMEN	(DED			
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATÉ	ADDITIONAL FEE	
TOTAL CLAIMS	<b>*</b> 21	MINUS	<b>**</b> 37	0	x \$25 \$50	-0-	
INDEP. CLAIMS	* 8	MINUS	*** 10	0	x \$100 \$200	-0-	
Fee for Mu	Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT—					-0-		

If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06 1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,

Attorney for Applicants

Frank L. Cire

Registration No.: 42,419

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200
Form #120

CA\_MAIN 94734v1